The CSO-Connect program is a professional learning community intended for schools that are able to engage teams of teachers from arts and non-arts classrooms in the development, implementation, assessment, and documentation of arts-integrated curriculum units inspired by a broad thematic idea that has rich connections to student learning needs.

CSO-Connect partnerships can be extended for multiple years based on the efficacy of the relationship. Each partner school must have a team of teachers that can participate in a series of five professional development workshops. Schools do not need to have a music teacher in order to apply.

**Section A: Information about your school and your arts program**

**School contact information**

School Name: 

School Address: 

School Network: 

Principal Name: Principal Phone Number: 

Principal Email: Number of students: 

Creative Schools Certification level (1, 2, 3, or 4): 

Applicant Name: Applicant Title: 

Applicant Email: Applicant Phone Number: 

List your school’s vision and mission statement:

________________________________________________________

________________________________________________________

________________________________________________________

________________________________________________________

Please provide the following contact information for your Arts Liaison:

Arts Liaison Name: Arts Liaison Email: 

Arts Liaison Title: Arts Liaison Phone Number: 
Arts Program Information

Please note that responses to the questions on the following two pages may be included on your Creative Schools Certification profile. Applicants may attach the 2017/18 profile to this application in lieu of answering questions in this section, but you must provide any important updates for the 2018/19 school year and answer questions not included in the Creative Schools Certification profile.

Please provide the following information for your Arts Teacher(s):

Arts Teacher Name: ___________________________ Discipline: ___________________________

Full-Time or Part-Time: ___________________________

Arts Teacher Name: ___________________________ Discipline: ___________________________

Full-Time or Part-Time: ___________________________

Arts Teacher Name: ___________________________ Discipline: ___________________________

Full-Time or Part-Time: ___________________________

Describe the arts instruction offered at your school:

Average minutes of instruction per week: ________________________________________________

Approximate percentage of grade levels having access to arts classes: ______________________

Is there funding within your school budget that is dedicated to the arts? (Yes or No): __________

Do teachers participate in arts-specific PD during the school year? (Yes or No): ______________

Do teachers utilize arts integration strategies (Yes or No)? If yes, please provide examples of the strategies and projects undertaken in the last two years: ________________________________________________

________________________________________________________

Do you host art exhibits, performances, or volunteer opportunities for students, parents, and the school community (Yes or No)? If yes, please describe: __________________________

________________________________________________________

________________________________________________________

Applications are due by 5:00pm on Friday, May 31, 2019
Contact Katy Clusen (clusenk@cso.org or 312-294-3044) with any questions
Is arts education a Strategy (or mentioned within another Strategy) in your school’s CIWP (Yes or No)? If yes, please describe: ________________________________

Arts Partnerships
List and describe any other arts partnership(s) in which your school is currently engaged:

Organization: __________________________________________________________

Name of Program: ______________________________________________________

Description of partnership (including discipline, grades served, components, etc.): ________________________________

Will this partnership continue in the 2019/20 school year? (Yes or No): ________________________________

Organization: __________________________________________________________

Name of Program: ______________________________________________________

Description of partnership (including discipline, grades served, components, etc.): ________________________________

Will this partnership continue in the 2019/20 school year? (Yes or No): ________________________________

Organization: __________________________________________________________

Name of Program: ______________________________________________________

Description of partnership (including discipline, grades served, components, etc.): ________________________________

Will this partnership continue in the 2019/20 school year? (Yes or No): ________________________________

Applications are due by 5:00pm on Friday, May 31, 2019
Contact Katy Clusen (clusenk@cso.org or 312-294-3044) with any questions
Will this partnership continue in the 2019/20 school year? (Yes or No): _____________________________

Other Information

Describe any unique characteristics of your school that would influence the shape and content of this partnership (e.g., student population, high percentage of special needs students, etc.):

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

The application continues on the following page.

Applications are due by 5:00pm on Friday, May 31, 2019
Contact Katy Clusen (clusenk@cso.org or 312-294-3044) with any questions
Applications are due by 5:00pm on Friday, May 31, 2019

Contact Katy Clusen (clusenk@csu.org or 312-294-3044) with any questions

Section B: CSO-Connect Application

Please use the space below to answer the following questions. If necessary, please attach any additional pages with your responses:

What are your school’s arts education strengths? What unique capabilities or resources does your school possess for the arts? (100 words max)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

What are your school’s arts education weaknesses? What can you improve in the arts given your current resources?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
If your school is selected for this program, who would make up the instructional team that would participate in developing and implementing the arts integrated curriculum unit? (Please list name, subject, and grade(s) for at least three people in your school, including arts teacher(s) and non-arts teacher(s).)

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Please describe any collaborative planning, instruction, or professional development in the arts that this team has undertaken together.

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Describe what you hope teachers and students will learn through participation in this program. (100 words max)

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________
How many hours does your school currently devote to collaborative planning?

Use the following scale to rate the collaborative environment within your school (Circle one):

**Low functioning**
Collaborative work at your school is Low functioning if less than 3 descriptors apply to your school

**Moderately functioning**
Collaborative work at your school is moderately functioning if 4 descriptors apply to your school

**High functioning**
Collaborative work at your school is high functioning if 5 or more descriptors apply to your school

- Clarity of purpose for collaborative projects: everyone understands the goals and objectives of the project
- Individual commitment to collaborative projects: teachers understand the value of the project
- Time to work together: teachers have time to work together on the project
- Basic understanding of effective communication and collaboration: teachers understand how to communicate and collaborate to successfully complete the project
- Supportive administrators: administrators support the process for completing the project
- Freedom to explore: teachers are given the freedom to choose the project that they want to undertake.

Cite examples of a successful collaboration at your school:
Teacher collaboration opportunities offered at your school include (check all that apply):

- Grade level meetings
- Planning meetings (after school, during school, etc.)
- Subject-specific meetings
- Other: __________________________

How will this partnership support your school’s mission and vision?

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

If your school is selected for this program, the CSO would reimburse your school for 50% of the cost of substitute teachers to enable the instructional team to participate in full-day professional development workshops. Is your school able to pay for the remaining 50%? (Select)  Yes  No

Thank you for completing the CSO-Connect 2019/20 Application.
Please submit all completed materials to Katy Clusen no later than 5:00pm on Friday, May 24, 2019.

Submit materials via:

Fax: 312-294-3450
Email: clusenk@cso.org
Mail: Chicago Symphony Orchestra
      220 S. Michigan Ave
      Attn: Katy Clusen
      Chicago, IL 60604

Applications are due by 5:00pm on Friday, May 31, 2019
Contact Katy Clusen (clusenk@cso.org or 312-294-3044) with any questions.